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Substitute for form 1449/PTO (Revised 07/2005)					Complete if Known				
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INFORMATION DISCLOSURE					Group Art Unit		3724		
STATEMENT BY APPLICANT									
(Use as many sheets as necessary)					Examiner Name		Clark F. Dexter		
Sheet	1	1 of 1			Attorney Docket Number		030627/274121		
U. S. PATENT DOCUMENTS									
	<u>Document Number</u>					-			
Examiner	Cite				Publication Date Name of Patentee or Applicant of Cited Document			Pages, Columns, Lines, Where Relevant Passages of Relevant Figures	
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<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.